

The Examiner

Naval Hospital, Twentynine Palms

"Serving with Pride and Professionalism"

Volume 4, No. 4

Spotlight On...

April 1996

Hospital Mail Room really delivers

hen it comes to getting the job done, there's only one office at Naval Hospital Twentynine Palms that can boast, "We deliver," with the possible exception of the hospital's Labor and Delivery Department.

That's right!

The staff of the hospital's Mail Room can literally boast "we deliver" for they're responsible for the delivery of all mail leaving and coming to the hospital.

Under the cognizance of Central Files, David W. Feeley, one of two civil service mail clerks employed by the hospital, said, "It may not appear as such, but thousands of pieces of mail pass through this Mail Room weekly." The other mail clerk is retired Marine, Joe Achterberg, who worked at the Joint Public Affairs Office on the Combat Center before retiring.

According to Feeley, a veteran of about 12-years in the Marine Corps and an employee of the Mail Room for nearly three years, three types of mail -- guard, personal and government official -- are processed (received, sorted and delivered) daily by the mail clerks and each must be handled differently.

"For instance," he explained, "Department of Defense (DoD) regulations prohibit guard mail from being intermingled with personal and government mail, therefore, it's sorted in a room separate from the mail room."

Feeley went on to explain that personal mail is merely collected and delivered to the Combat Center Post Office. Every piece of official government mail, however, must be screened for accuracy as prescribed by the post office. "If it doesn't meet the criteria established by the post office, it's returned to us for corrections," stressed Feeley. "We seldom have mail returned. We screen quite well because returns cause delays."

As for UPS and Federal Express, Feeley said, "... neither are associated with the US Postal Service, so, in compliance with DoD regulations, we're not authorized to handle or store any such parcels."

Aside from merely processing the mail

within the mail room, the clerks are also responsible for receiving from and delivering mail daily to the more than 160 locations that comprise both the hospital and Combat Center. "It may seem like a lot of locations, and I assure you there are, but we clerks have developed a system that enables us to do all of what's required with the least amount of effort and in the most efficient way," said Feeley.

Even though he readily admits that the

Continued on page 6.

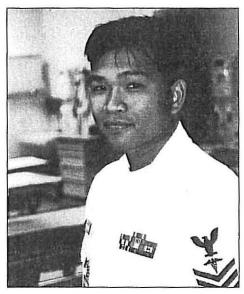
HM1 picked as COMMARFORPAC Shore SOY

Hospitalman 1st Class (FMF) Manuel Barcelona, of Naval Hospital Twentynine Palms, has been in the news a lot lately. The 29-year-old Sailor, a 1984 graduate of Palm Springs High and a current resident of Palm Springs, CA, has been selected as the Senior Sailor of the Year for the Naval Hospital and was then selected as the Marine Corps Air Ground Combat Center's Senior Sailor of the Year.

HM1 Barcelona is now getting more press by being selected as the Sailor of the Year for Commander Marine Forces Pacific Shore (COMMARFORPAC)... a well deserved title, according to his co-workers at the hospital.

"HM1 Barcelona received these honors by being an exemplary Petty Officer. He has been performing at the level of a Chief Petty Officer as the Senior Enlisted Leader for the Directorate of Nursing Services, providing superb leadership for 110 enlisted staff.

Continued on page 6.



HM1 (FMF) Manuel Barcelona, Senior Enlisted Advisor for the hospital's Nursing Directorate is again honored for his hard work and diligence.

An advance heads up

See page 2

Career Information

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Medical Boards Info

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Hart of the Matter...

An advance 'Heads Up!'

s opposed to my usual philosophical column, this column is basically "newsy." We have a number of significant events coming up over the next few months so I just thought I would give you a well-in-advance heads up.

•March 96 (with f/u in May). The Board of Directors will be going off site for 3-day sessions to revise and update our Strategic Plan. This hospital, perhaps more than any other, needs to look to the future. We are on a booming base -- a base that will see up to 3,000 Marines added to our on-base population over the next 3-4 years. Our hospital needs to plan for its growth.

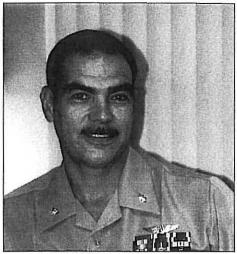
•12-July 96. Our Commanding Officer,

Captain C.S. Chitwood's retirement and Change of Command. Captain Robert Kayler, MSC will be assuming command.

•31 July 96. Captain Kozero's retirement. Captain Leslie Robinson will assume duties as Director of Nursing Services. CAPT Kozero's superb leadership and visionary qualities will leave a lasting positive impact on our Naval Hospital.

•8-9 Aug 96. Health Support Office (HSO) San Diego will be on board for a Pre-IG assist visit. (Stand by, we'll have lots of visits in preparation for the upcoming IG inspection and Joint Commission survey.)

•18-23 Feb 97. Bureau of Medicine Inspector General Inspection. Remember



Captain S.E. Hart

now, wear your smiley face. We want them to come help us find ways to improve.

•April 97. Sometime after the IG, we'll have a pre-JCAHO (Joint Commission) assist visit. According to BUMED, we will receive additional active duty billets in April 1997. We may see bodies earlier, but the billets arrive 97. LCDR Pedes, MSCs (3), LCDR Int Med, LCDR Psychiatrist, LT Radiologist.

•July 97. Captain Ragan retires... shortly thereafter the hospital collapses.

•Dec 97. JCAHO Survey. This is a big deal. Let's show them the best patient care system in the country!

Navy community-oriented organizations invited to participate in video teleconference Apr. 17

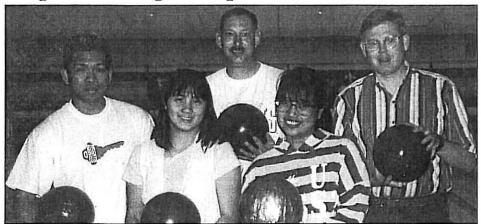
WASHINGTON (NWSA) -- Navy health care facilities, family support centers, chaplains and casualty assistance offices are invited to join other community-based organizations on April 17 in a live-via-satellite video teleconference on grief and bereavement issues involving sudden and traumatic death.

The professional education program is provided free of charge as a pubic service. Cokie Roberts of ABC News will moderate the teleconference with a distinguished panel of experts who will respond to live call-in questions from the viewing audience.

More than 1,500 community-based organizations across the United States and Canada will serve as local downlink sites.

For additional information on how to participate in the teleconference, write to the Hospice Foundation of America, 2001 S. Street, NW, Suite 300, Washington, DC 20009; telephone (202) 638-5419 or fax (202) 638-5312.

Hospital Bowling Team places 1st...



Members of the hospital's Unit Challenge Bowling team champs are left to right, HM1 Manuel Barcelona, of Nursing Services; Miem Barcelona, HM1 Rick Deluna, of Patient Admin; HM1 Helen Fayloga, of Radiology and CDR Robert Connors, DFA.

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Commanding Officer CAPT. C.S. CHITWOOD, MSC Executive Officer CAPT. S.E. HART, MC Public Affairs Officer/Editor DAN BARBER

The **EXAMINER** welcomes your comments and suggestions concerning the newsletter. All comments should be forwarded to the Public Affairs Office by the 15th of each month. The Public Affairs Office telephone number is (619) 830-2362.

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The **EXAMINER** staff would like to thank all those who participated in this edition.

Chaplain's Corner...

Creation or Evolution - Healing or Hopelessness

By LT. Samuel Ortega, Chaplain Naval Hospital Twentynine Palms

n the beginning God created the heavens and the earth. (Genesis 1:1) For be lievers in God this is a fact, and any other position is not true. By faith we believe the words of God through the evidence of His perfect creation, and most remarkably, the evidence of His presence within us. We don't need to search the layers of earth and the bones of decaying animals, instead we must search through God's Spirit and wisdom, His Word, our heart, and the hearts of others. Only after doing this will anyone believe that God is the Almighty Creator.

The world around us searches for answers to questions that can never be answered without the aid of God. God tells us that His ways are not our ways, and His thoughts are not our thoughts. So why do we try to figure out everything? My guess is, that's the way we are. Some want answers to their questions and will formulate anything, even if it's a lie.

God tells us that His ways are not our ways, and His thoughts are not our thoughts.

As we work here at the Naval Hospital, I believe it's important to believe in God, His love, and healing power. Daily we witness His healing power with the patients we treat. There are miraculous cases that cannot even be explained by the most intelligent physicians. Evolutionists can't explain them on any chart or in a laboratory using carbon 14 and other methods of research. We just need to humble ourselves and accept the limited knowledge God has given us. To try to resolve God's immeasurable abilities with our finite abilities is illogical and a waste of time. There are just some things like creation and miracles that only He can explain.

The greatest evidence that I have that God exists and is trustworthy in what He



Lieutenant Samuel Ortega

says and does, is through the evidence of His power and presence in myself and in individuals. His love, peace, joy, pureness, kindness, truth, **righteousness**, honor, gentleness, goodness, faith, meekness, temperance, hope, grace, freedom, patience, humbleness, and power, in individuals are all proof that what the scriptures say are true. Atheists cannot fully receive and understand these characteristics in their lives. The Lord says, "Therefore speak I to them in parables: because seeing they see not; and hearing they hear not, neither do they understand." (Matthew 13:13) On the other hand, the believer in God receives these characteristics through a strong conviction that a Higher Power loves, protects, directs, and saves him/her by faith. God gives the Atheists a taste of His attributes in order to lead them to Him. Like some of you, I have personally seen atheists who are kind and loving, but God has so much more to offer them.

While we serve and care for our patients here at the Naval Hospital, I want to encourage you to share all that our living and loving God has given you with as many people as possible. We sometimes have individuals come through our workspaces who don't know God and His love. By experiencing God's love and care through us, they can obtain hope, strength, peace, and healing.

MWR News...

By HM3 Dianne Davis, Naval Hospital MWR Committee

Greetings from the MWR committee, I just wanted to take this opportunity to make you aware of some upcoming events for April.

Command Sports

Apr 1 -- The command softball team will be having their first tournament. For more information contact HMC Housted ext. 2396.

Apr 3 & 10 -- Interdirectoral "Wallyball" and Basketball between Ancillary Services and Military Sickcall. Time and place TBA, for more information contact HM3 Selles ext. 2145. Come out and support our players.

Base Sports

Intramural Racquetball and Men's and Women's softball. Times and locations are on the MWR board located by the galley.

Other Events

Apr 1 -- Ice Cream Social, time and location TBA.

The MWR Committee has an events board located by the galley, other events coming up within the command or on the base will be posted. If interested in becoming a member or you just want to see what the hospital's MWR Committee is all about they have meetings at 1300 in classroom 3, every 1st & 3rd Wednesday of the month. Remember you can make a difference by being there.

If it's Monday, it must be Meatloaf

By Elaine T. Grossman, M.S.,R.D. Naval Hospital Twentynine Palms

s your daily diet BORING? I use to tell my patients that if their diet was boring, Lit is because they are boring...but I got into too much trouble so I don't say that anymore. However, if the shoe fits The people who generally complain about boring diets are usually the same ones who are trying to eat healthier. And I grant you, a piece of grilled chicken, a side of broccoli and a plain baked potato gets boring real fast. In fact, it is not even considered healthy if that is all you are ever eating. So, if that is the case, then you also need to know that you are missing out on, among other things, one of the easiest healthy dietary guidelines you can follow.

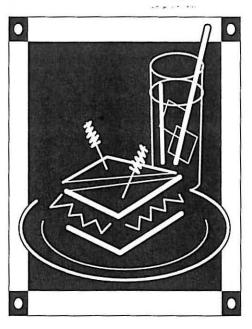
March is National Nutrition Month and the theme for this year is "Enjoy the Variety of Food Choices." One of the Lieutenants said: "It all sounds great, but I never know what to cook. Whenever I go to my friend's house, she turns out these fabulous gourmet healthy meals and I am turning out meatloaf made with the 7% hamburger. It is healthy, but that is it." So I thanked her for giving me the idea for my article.

There is no magic wand to turn you all into gourmet chefs - you need to do it yourself. And variety is one of the keys to being a chef instead of a cook. But before we get into change, I need to take a few sentences here (often called commercials) to tell you why variety in food is so good for your body.

All fruits, vegetables and grains are grown in particular soils that promote growth of individual foods. Therefore, soils containing certain vitamins and minerals will produce a very healthy banana, but might be the wrong soil to promote the growth of tomatoes. So, the wider variety of foods you consume, the better the chance of obtaining a wider variety of nutrients. The same is true even for animal consumption. because different animals consume different types of foods, which are grown in different soils, and you eat the animal that ate the food that grew in a certain type of soil. So you can see, consumption of a wide variety of foods is good. (Also, this way you won't get a concentration of any particular

herbicide or insecticide from overconsuming one particular kind of food.)

So now that is over, what's to eat? First of all, do NOT throw away everything in your kitchen. This is a process that should be a slow one, especially if you are the cook. Don't pressure yourself to change everything all at once - you also do not want everyone in your household to think you are suffering sunstroke. Start with one meal at a time. Breakfast is surely the easiest. Instead of making eggs and sausage for breakfast, how about an omelette with mushrooms, onions and green peppers and if you feel like a daredevil, make them with an egg substitute



or with egg whites only. Now here is the trick - continue to serve the sausage. The meal needs to be user friendly. Acceptance of healthy variety comes from surrounding new foods with old favorites. And, if you are not yet ready to start cutting back on the fat in your diet, adding vegetables to them will still increase variety and get some vegetables into someone who might not consume them very much. Or, how about that waffle - put some fruit flavored yogurt on it instead of butter and syrup, and even throw some fresh fruit on top of that so it will look appetizing. This is not costly if you use fruits in season. What if you put raisins in your oatmeal in the shape

of a heart, surely someone will notice how special you are.

Lunch - and yet another boring sandwich - and even fast food sandwiches become boring. In fact, you will generally notice that people who go to fast food restaurants rarely go alone. If they are alone, they often just take the food home. So many times the variety you think you are getting with food might just be the company you are keeping at that time. So how can you get away from a boring lunch? One easy way is to change the type of sandwich you consume. Start with a lunch meat that you always like and from there add a slice of lowfat cheese. Lettuce, tomato and peppers on the sandwich and a whole new taste is happening. Instead of chips with it, how about some leftover rice or pasta from last night - or pretzels - or jello - or cucumbers and onions in vinegar left over from dinner last night (watch the onions if you are trying to make an impression at a meeting). Change the fruit to something different than that same old apple. If it has a stem, tie a bow on it. How do you dress up a peanut butter and jelly sandwich? - easy, just slice some banana on top of the peanut butter - or perhaps sprinkle a few raisins on it. One lady I know would put little notes into her husband's sandwiches every day. She was a bit upset because he never said anything about the notes. So, one day she asked him and he said that he did not know she put in the notes and had been eating them - so here we have additional fiber in the diet. If your children are not accustomed to, and do not like changes, first start cutting their bread into animal shapes with cookie cutters and then start changing what is in-

Dinner - not an easy task, especially if you are a busy-on-the-go person. How can you get fancy with variety when you have 20 minutes to get the food on the table?

Well, here, planning a little ahead might be a good idea - but, again, not always possible. Remember, we are just going to change one food at a time. Start with a side dish. If possible, make some rice or noodles ahead of time by a day or two. Then, with your piece of chicken, fish, beef, etc. you can add a pasta dish instead of instant mashed pota-

Continued on next page.

Meatloaf.

Continued from previouspage.

toes. Just a little garlic and olive oil and a quick zip in the microwave and your side dish is done in less time than instant potatoes (and less mess to clean up). Or, how about some tomato sauce on that pasta or a sprinkle of Parmesan cheese and parsley for taste and decoration. And parsley consumed after a meal gives a nice sweet breath. If you are trying to get some more vegetables into your diet, just put the rice or pasta in a pan with some defrosted frozen vegetables (if you do not have time to make fresh ones) and a dash of peanut oil and a quick stir fry. It will taste as though you spent a lot of time in the kitchen. Pasta and rice that have been refrigerated actually retain their integrity in a stir fry better than those that were just made which often become mushy.

What about those vegetables. Take your zucchini, eggplant or other favorite vegetable, dip them in egg whites and place on a cookie sheet coated with a butter type spray. Season, bake at 350 degrees for about 10 minutes, turn, season again and bake another ten minutes and you have just made your vegetables very special. Want more, serve with BBQ sauce for dipping. How about grilling those vegetables on the BBQ. Or, put little pieces of meat with vegetables on a skewer and put under the broiler if you do not have a BBQ. Serve with brown rice sprinkled with a few slivered almonds.

Just hamburger tonight? How about hamburger surprises. We were very poor and mom had to make everything go as far as possible. So she would make a very thin hamburger and top it with onions, tomatoes, pickles, etc. or with BBQ sauce and pineapple chunks. Then she would make another thin patty and top the hamburger and pinch the edges together. Then she would say the dinner was hamburger surprises and we all had to take a turn and try to guess what was inside before we ate it. I think that is how mom got a lot more vegetables into us then we had planned on eating. Also, it was a way to get rid of some foods without serving leftovers. So, these are just a few little ideas I came up with at the spur of the moment. What about you? Can you think of something you prepare that turns boring into special? If so, just drop us a line and put it in "Hospital Mailboxes" in the Child Care Center and at any reception desk in the hospital. Bon Appetite!

Career Information Program Management

(CIPM)

'How it works in a nutshell'

By HMCS(FMF) Fernandez, Command Career Counselor and YN3 Smotherman, Asst Command Career Counselor

Inder the CIPM concept, the Command Career Counselor has the primary responsibility of managing the Command enlisted retention program. He provides training of retention team members, disseminates career information and ensures required interviews and career counseling activities are conducted by retention team members.

By decentralizing retention team activities, the command career counselor assumes a different role, that of career information program manager. The key to the success of the CIPM program is the delegation of responsibility for routine counseling to the appropriate retention team members or, in other words, decentralization of counseling activities at the deckplate level. In essence, the chain of command (i.e. LPO's, LCPO's, DO's and DH's) are involved in the career counseling of personnel under their charge. This idea of "chain of command involvement" is rooted in the basic tenets of good leadership. Good leaders know their people, they sit down and assist juniors achieve their career goals.

The Command Retention Team members have recently completed a three-day Career Information Training Course (CITC) to provide them tools to function as directorate/department career counselor. Hence, personnel should seek the assistance of their assigned directorate/department career counselor first, before going to the Command Career Counselor's office. It could save people some valuable time. At any rate, the Command Career Counselor's office will be glad to provide assistance beyond the expertise of directorate/department career counselors.

Meet your directorate/department career counselor. The following personnel are members of the Command Retention Team and their assigned area of responsibility:

DIRECTORATE(S)/DEPARTMENT(S)

MANPOWER, PATIENT AFFAIRS, EDUCATION AND TRAINING, OPMAN, MID DIRECTOR, ANCILLARY SERVICES MATERIALS MANAGEMENT, FACILITIES PHYSICAL THERAPY, LABORATORY RADIOLOGY, PHARMACY, OPTOMETRY FAMILY PRACTICE CLINIC, INTERNAL MED, MENTAL HEALTH FOOD SERVICE MILITARY SICKCALL MSW, PEDS CLINIC, EMERGENCY, ROOM, PERIOP, SURGERY CLINIC, ORTHO MIW, L&D, NURSERY, OB/GYN CLINIC

HMCS(SW) PRESTON

HMCS(AW/FMF) GOGO HM1 MALONEY HM1 CHAPOCO HMC(FMF) MONSALUD HM1(SW) EWING

MSLBAXTER HMC(SW) FALE HMC(FMF) DE GUZMAN

HM3(FMF) ROMERO

Retention of quality sailors is an "ALL HANDS" responsibility. Get involved and Stay NAVY!

Earth Day Celebration is set for April 19! Come join in the fun at the MCAGCC... Watch for details in the Observation Post!

Mail Room-

Continued from page 1.

number of locations has created no difficulty for them, Feeley did indicate it does sometimes pose a problem for the customer. "Because of the number of pick-up and delivery points we have, we're away from the Mail Room for extended periods of time," he explained. "This often requires those checking in and out, having urgent questions or just needing to pickup parcels to track us down." However, to alleviate the problem, Feeley goes on to say the Mail Room, located in Room D009 on the lower level of the hospital, is open daily from 2 to 2:30 p.m., and one of the two mail clerks is there for the purpose of issuing mail, answering questions and checking personnel in and out.

"In addition; to provide for even better service, one mail clerk comes into work at 5:30 a.m.," Feeley said. "The purpose of this is to provide service to those who work the night shift. "Also, for the convenience of the customers, we have an answering machine in the office. "If customers are having a problem locating us, they can call ext. 2938 and leave a message," he added.

As for problems encountered by the mail room, Feeley says there are two, "Departmental mail orderlies not picking up departmental mail daily from the mail room, and personnel being assigned to different departments and not informing us of their new locations. Let's face it, there are more than 500 people assigned to the hospital and we have

no way of tracking everybody's moves. We must be informed," stressed Feeley.

In addition to handling the hospital's mail, the clerks also act as couriers between the hospital and the Combat Center's Communications Center and Reproduction Facility. "We also do a lot of miscellaneous chores throughout the course of the day, but it's all within a day's work," smiled Feeley.

So, just how good is the hospital's mail service? The mail room is inspected weekly by the hospital's Assistant Postal Officer, Mr. Wayne Menard, and quarterly by the Combat Center Post Office. Since being implemented with civilians three years ago, the Mail Room has never received less than an excellent. "We're good," summed up Feeley. "We deliver."

COMMARFORPAC Shore SOY—

Continued from page 1.

He has been ranked as the number one First Class Petty Officer at this command two years in a row," said Captain Elizabeth Kozero, NC, USN, Director, Nursing Services. HM1 Barcelona was also recently awarded the Navy Achievement Medal for his performance as the Leading Petty Officer of the Emergency Medicine Department. As if he wasn't busy enough already, HM1 Barcelona volunteered to attend Financial Counselor School and subsequently wrote the command's instruction on financial management. He is also an active member of numerous boards and TQL teams and committees and conducts Navy Rights and Responsibilities workshops, in-service classes and advancement study groups. With all of his extensive command involvement, he still finds time to be active in numerous community activities including coordination of the Shriner's Screening Clinic in Indio, CA, coaching Little League Baseball, Pee Wee Basketball, Over 30 Basketball Team, and the Varsity Basketball Team. He was also President of the Base SNCO/Officers Bowling League and spokesperson for the 1995 Young Alliance Bowling Association. "HM1 Barcelona is the quintessential First Class Petty Officer," said CAPT Kozero.

"Naval Hospital Twentynine Palms is really a great place to work," said Barcelona. "There is a lot of opportunity for people to get involved in command activities here because this hospital and the Nursing Directorate really emphasize the Total Quality

Leadership philosophy which empowers everyone to improve the work environment," he added.

To reach the point of being named SOY for COMMARFORPAC, HM1 Barcelona has had to go through some very tough competition, with other Sailors at Naval Hospital Twentynine Palms, the Marine Corps Air Ground Combat Center, and from various other Marine commands around the Pacific region, where he came out on top.

According to HMCS (FMF) William Fernandez, Command Career Counselor, "If you look up the definition of a hard-charging, squared away Sailor in the Navy's Blue Jackets' Manual, you might find a picture of HM1 Barcelona, because he really believes in the Navy and in taking care of junior personnel.

What is HM1Barcelona's future plans with the Navy? "I would like to one day be a

Command Master Chief, so I can help junior personnel reach their own goals in the Navy," he said. What was Barcelona's reaction to being selected? "I was very surprised to learn that I was selected out of all the very good Sailors that COMMARFORPAC had to choose from," said Barcelona.

HM1 Barcelona, a local by desert standards, calls Palm Springs his home town, where he lives with his wife Marilyn and sons, Marques, 7, and Matthew, 4.

The next selection process takes place in Hawaii in April for the title of Commander in Chief Pacific Fleet Sailor of the Year. The winner there will compete for Chief of Naval Operations Sailor of the Year in Washington, DC later this year.



HM1 (FMF) Manuel Barcelona is well prepared to help the enlisted staff of the Nursing Directorate here at Naval Hospital Twentynine Palms.

Letters...

Thanks to all Dear Captain Chitwood,

There is nothing more precious and greater than life, for when it's your time then money has no value, which is why we need a strong foundation which is called love, it gives us strength and willpower to carry on.

Therefore I love and thank all of you from my heart. When you came to my rescue, there sure was a lot of love. May the Lord bless all of you and keep up the wonderful work.

Forever, Always Sincerely Jo Ann Cooke

Thanks for assistance Dear Captain Chitwood,

While in Indio recently, my wife needed to have her pro-time blood work done. Per your letter of 29 April 95, we phoned LCDR Longenecker so that she could give us a helping hand. Unfortunately, LCDR Longenecker was on leave. I talked with LT Schulz who very efficiently set up an appointment with LT Kearny. My wife's lab work was done promptly and the results were phoned to us the same day.

I want to compliment LTs Schulz and Kearny for their first-rate courtesy and professionalism. On our next trip south we hope to have the pleasure of meeting LCDR Longenecker.

Thank you again for your assistance.

Sincerely Howard L. Reynolds MAJ USAF Ret.

Letter policy

Letters will be published on a first come, first served basis. They should be typewritten, with the writer's full name. Letters should be brief to allow maximum participation by others. Letter writers should refrain from making personal attacks. Letters addressing specific problems pertaining to patient care can also be addressed to the Patient Contact Representative or other appropriate hospital staff member for action. Deadline for submission is the 15th of each month for the following month's issue.

Impressed with care Dear Captain Chitwood,

A few months ago my daughter had an appointment with LCDR Miller.

I was so impressed with the quality of care she received, the patience that was exhibited by LCDR Miller and the caring attitude. These qualities all served to make my daughter feel comfortable and at ease during her appointment.

LCDR Miller gives a fine example of the quality of care that is available at this facility.

Hopefully we will continue to receive the same caliber of health providers in the future.

Sincerely Mrs. Sarah Hernandez

TRICARE dental plan changes hands

CAMP HILL, Pa. (NNS) -- United Concordia Companies Inc. (UCCI) assumed responsibility for the TRICARE Active Duty Family Member Dental Plan from Delta Dental on Feb. 1.

UCCI mailed information and dental benefit booklets to all enrolled sponsors. If you are enrolled in the TRICARE Active Duty Family Member Dental Plan and have not received the dental benefit booklet, contact the UCCI customer service representatives at 1-800-866-8499 (8 a.m. - 8 p.m. EST). A list of participating dentists can be obtained from local health benefits advisors.

Examiner Want Ads

Snowboard, bindings and boots (size 12) \$200. Contact Capt. Hart at x2351. (No, I'm not giving up snowboarding).3

Must Sell: Cancun "Time-Share", extremely cheap! Yearly maintenance fee only \$314. No other payments! '96 Maint. fee already paid. Unable to use, must sell ASAP! Call-Donna Templeton at ext. 2430. 3/4

Vito Tenor Saxophone: In excellent condition. Like new. Case included. Asking \$650. Call Chaplain Ortega at ext. 2429 or 2779 3/4

House for rent: 4-bedroom/2 bath, large fenced yard, carpet, oven, range, refrigerator, AC and evap cooler, gas, 110 and 220 electricity, washer/dryer hook ups. \$600 per month. \$600 deposit. Call (619) 367-7607. 4 Write up what you want listed in your ad (please keep it as brief as possible to allow participation by others, space is limited). Ads cannot be business related. For more information on how to get your ad listed here, call the Public Affairs Office at x2362.

An honorary 'Desert Rat'...



At a recent departure ceremony in the hospital's Emergency Medicine Department, Capt. C.S. Chitwood, Commanding Officer, presented an Honorable Desert Rat certificate to HN Jennifer Nevarez, as CDR Lisa Hiles, Assistant Director, Nursing Services looks on.

Here's To Your Health...

HIV? Me? Never!

By Charlotte Meinecke, R.N., Nurse Educator, Naval Hospital Twentynine Palms

e is young, handsome, physically fit, financially secure, has a great personality and is the nephew of the great John Wayne, the Hollywood hero. He is also a professional boxer on the verge of making his place in boxing history. Who is he? He is Tommy Morrison.

Name sound familiar? The name Tommy Morrison recently was flashed as front page news and lead television story headlines when he announced he had tested HIV-positive. He was not sick and did not appear to "belong" to the "stereotype" groups who are known to be at higher risk for AIDS. In fact, the only reason he was tested was to satisfy the state boxing regulations prior to a major championship fight. Who would have guessed he would end up testing HIV-positive? After all, becoming HIV-positive is something that happens to someone else, but NEVER ourselves.

A person is said to be HIV-positive if antibodies to the virus are detected in their blood. It may take up to 6 months after the body is introduced to the virus for these antibodies to appear. Someone who is HIV-positive may appear to be healthy for 10 years or longer before the symptoms of AIDS develop. In other words, even those who are young, "healthy" and physically fit could have been introduced to HIV without signs or symptoms of the exposure.

The early symptoms of HIV infection are flu-like and persistent. Common symptoms are rapid unexplained weight loss, **persistent** unexplained fever and night sweats, severe fatigue, diarrhea and swelling glands in neck/armpits/groin.

Diagnosis of HIV exposure is determined by a confidential blood test available from Naval Hospital, a private physician office or local health department. Remember, it can take up to six months after infection for HIV antibodies to develop, but the HIV virus can still be transmitted in the meantime.

Once exposed to HIV, it is a lifetime, lifethreatening condition. Researchers state most people who are HIV-positive will eventually develop AIDS. Although there are treatments for some of the symptoms of AIDS, there is currently no cure, and it is always fatal.

HIV is NOT spread by mosquitoes, toilet seats, donating blood, or casual contact with someone who is HIV-positive or who has AIDS. It is not spread by being touched, hugged, or lightly kissed by someone who is HIV-positive. Because all blood has been tested for HIV since 1985, the risk of getting the virus from blood or blood products given to you is extremely low.

HIV is spread when blood, semen, or vaginal fluids from an HIV infected person enter someone else's body. It takes only one exposure for the HIV virus to enter your body. The "at-risk" behaviors that spread HIV include:

- 1. Unprotected sex (without a condom from the beginning to finish) with someone who is HIV-positive, regardless of route (vaginal, oral, or anal). Any microscopic "tear" in the these mucus membranes will welcome the virus.
- Sharing injection needles and syringes with someone who is HIV-positive.
- Babies born to or breast-fed by women who are HIV positive are also at risk for contracting the virus.

Although AIDS and HIV cannot be cured, it can be prevented. Long-term monogamy between uninfected partners or sexual abstinence completely eliminates the risk of HIV and other sexually transmitted diseases. Other actions that will reduce your risk are:

- 1. Use condoms EVERYTIME until both you and your partner have been tested and found not to have any sexually transmitted disease and that neither of you will have unprotected sexual contact with anyone else while your relationship lasts.
- 2. Avoid unprotected intimate contact with anyone whose sexual history may not be risk-free. Use a new latex condom from the beginning to the end, everytime. "Natural" or lambskin condoms do not protect against HIV infection. For greater protection, use a spermicide containing nonoxynol-9 in addition to condoms.
- 3. Remember that it can take up to 6 months before HIV can be detected in your blood. If you plan to use HIV testing to decide whether condoms are needed, wait six months after any unprotected sexual contact or other high risk behavior. During this time, both you and your partner need to avoid unprotected sexual contact and use condoms every time you have sexual contact.

As Tommy Morrison found out, anyone can become HIV-positive. HIV knows no boundaries of race, sex, age, or religion. Being in charge of your own life-style and intimate contacts is a 24-hour a day, all day, everyday job...when done well, will result in a long, healthy, HIV-free life.

For more information about HIV and AIDS, contact the National Aids Hotline at 800-342-AIDS, your health care provider (civilian or military), or Charlotte Meinecke, Nurse Educator, Naval Hospital 830-2218.

Things to do around town in April...

Apr. 3 - Easter Egg Eggstravaganza, 29 Palms Branch Library. 10 a.m. to Noon. All ages welcome. Special "egg" story at 10, 10:45, 11:30. Bring six hardboiled or 6 blown eggs per child. 6078 Adobe Road, 29 Palms. 367-9519.

Apr. 5 - "24 Hours of Photographing Joshua Tree National Park." 5 p.m. Meet at the Park Headquarters for orientation. One second after midnight, the 24 hours of photographing the Park begins. On May 11, participating photographers return to submit prints for photo mural. For registration information, send stamped self-addressed envelope to "24 Hours in JTNP" 74485 National Park Drive, Twentynine Palms, CA 92277

Apr. 6 - Messiah '96. Performances at 2 p.m. Living Stream Fellowship, Yucca

Valley. 7:30 p.m. at Protestant Chapel on board Marine Corps Air Ground Combat Center. To join production/rehearsals, call Ed Will at 366-9722 or Gretchen Will at 365-3521.

Apr. 7 - Easter Sunday. Art Show Reception, 29 Palms Art Gallery, 1 to 4 p.m.
Featuring 29 Palms Artists' Guild Members' Show (Through April 28). 74055 Cottonwood Drive, Twentynine Palms. 367-7819.
Apr. 12-13-14 - Sheriff's Mounted Posse Benefit Ride, Twentynine Palms.
Apr. 13-14 & 20-21 - Joshua Tree
National Park Art Festival. 4th Annual art showing at Park Headquarters & Visitors' Center, 74485 National Park Drive,
Twentynine Palms (At Utah Trail). For more info contact JTNP Association at

Continued on next page.





Things to do

Continued from previous page.

(619) 367-1488.

Apr. 13 - Art Auction at the 29 Palms Art Gallery from 4 to 5 p.m. 74055 Cottonwood Drive (off National Park Drive) Twentynine Palms. 367-7819 or 367-4106.

Apr. 13 - Art Show Reception, Monument Galleries, Joshua Tree. 1 to 4 p.m.
Twentynine Palms artist Steve Hill, desert oils (on display through April). Gallery open Monday through Saturday from 10 a.m. to 5 p.m. Monument Galleries at BbarG Framing, 61864 Division, Joshua Tree. 366-3799.

Apr.13-14 - Copper Mountain College Benefit Golf Tournament. 12th Annual Friends of Copper Mountain College benefit golf tournament at Roadrunner Dunes Golf Course (Desert Knoll at Amboy Road), Twentynine Palms. For more information, FCMC office at 367-3591. Apr. 19-21 - Laughlin Motorcycle River Run.

Apr. 20 - Historical Society Field Trip. Coachella Valley Museum & Cultural Center and Date Gardens in Indio. Tour, picnic lunch. Meet at 9 a.m. at Old School House Museum, 6760 National Park Drive, Twentynine Palms. 367-2366

Apr. 20-21 - Howling Coyote Bluegrass Festival. Second Annual Bluegrass Festival at Miller Memorial Fairgrounds on Adobe Road. All day music, booths, food and fun. Dry camping available. Contact the Twentynine Palms Chamber of Commerce at (619) 367-3445.

Apr. 26 - (Through May 12) - A Mid-Summer Night's Dream at Hi-Desert Playhouse. Friday and Saturday 8 p.m., Sundays 2:30 p.m. Hi-Desert Playhouse, Twentynine Palms Highway, Joshua Tree. Box Office: 366-3777.

Apr. 27 - Chili Cook-off and Country Dance. Sponsored by Soroptimists Intl. of Twentynine Palms. (367-3926). At Elks Lodge, Twentynine Palms.

Apr. 28 - Copper Mountain College Dedication of Xeriscape Garden, Copper Mountain Campus. Afternoon entertainment, refreshments in Xeriscape Demonstration Garden on campus. Free, with small offerings encouraged. Friends of Copper Mountain Campus, 367-3591. Editor's Note: The above information was reprinted with permission of The Sun Runner Magazine.

Devil Docs shoot em up!

Military Sick Call's (MSC) motivated Devil Docs conducted weapons familiarization training at MCAGCC's range in March. This training was conducted to introduce Corpsmen to the tactical aspects of emergency Medical services operating in the hostile environment. Phase II will place Corpsmen in the hypothetical line of fire, and involve them in decisions related to managing casualties during armed conflict... Weekly inservice training at Military Sick Call is conducted every Wednesday from 1300 - 1500. Training is designed to prepare Hospital Corps staff for scenarios which may present during fleet, FMF, or warfighting operations. MSC training schedules are available by calling ext. 2620, and hospital staff are welcome to attend. Point of contact is Ensign Hoover.

Notable Quotable:

"When I go aboard a ship and somebody is showing me their equipment and they say this is 'the ship's' radar or this is 'the captain's' radar ... I get one kind of message. [But] when a young Sailor says 'this is mine', I see that pride and I get a very different kind of message. When I look around and see the leaders feel the same way about what this person's saying, I know something is very right. I'm seeing more and more of that in the Navy and I think that is the way you affect retention." Chief of Naval Operations, ADM Mike Boorda during an interview with Surface Warfare Magazine Feb. 27, 1996, appearing in the March/April issue.

Medical Boards

Where we were - where we are - where we will be

edical Boards at Naval Hospital Twentynine Palms have under gone significant transformation in the last two and a half years. Before January 1994 it took an average of 70 days to process a medical board prior to it being mailed. After considerable process review and adjustments, medical boards are now done in less than 15 days (the requirement is 30 days).

The medical boards process seems to be a mystery to most members. Few understand medical boards and yet many Marines and Sailors are affected by it on a daily basis. The medical board process could start with a Limited Duty period. Limited Duty Boards are designed to place the active duty member in a medical hold status with limitations in order for them to heal from an injury or illness that a Medical Officer believes will take longer than 30 days. Usually a member will be placed on six months limited duty. At the four month point the member is reevaluated for determination of return to duty, continued limited duty or a referral to the Physical Evaluation Board (PEB).

A member can be extended for up to one year of limited duty which is a local determination. Once the limited duty period goes beyond a year, the board must be forwarded to departmental review, which means the board is forwarded to either the Bureau of Personnel or Headquarters Marine Corps for approval of additional limited duty. Departmental review can make the recommendation to forward the board to the PEB.

Members can be recommended to the PEB without ever being in a limited duty status as well. If the Marine or Sailor has an illness or injury that could be permanent the Medical Officer will forward the medical board to the PEB for determination of fitness for duty.

Currently there are more than 300 Marine Corps Air Ground Combat Center personnel on limited duty. "We are still 'tweaking' the system to improve the process, tracking of members and communicating with the units of members involved in the process," said Lieutenant Anne Swap, Head, Patient Administration.

One of the Patient Administration Department's upcoming projects is to start a wellness program for members on limited duty. The department is going to work closely with the Health Promotions Officer to get this program off the ground. One of the major complaints units and members have about limited duty is the member's inability to stay in weight standards. "We hope to educate and follow members more closely to ensure they stay or get back into weight standards," said LT Swap.

What is a PEB?

A Physical Evaluation Board is initiated with a report submitted by a board of Medical Officers at a Military Medical Treatment Facility (MTF). The PEB is located in Arlington, Virginia and is the authority that determines fitness for duty and assigns Veteran's Administration codes and disability percentages.

The active duty member's physician identifies a medical condition that is an unfitting condition, and dictates the board. The member then reports to the Medical Board Section in the hospital's Patient Administration office to begin the board process.

The process begins with notification of the member's command. This notification includes the member's duty limitations, and the basic requirements regarding leave, TAD, PCS, release from active duty, and the administrative separation or disciplinary action. While on a medical board, the member cannot TAD, PCS, or be released from active duty. Administrative or disciplinary action

resulting in an Other than Honorable or a Bad Conduct Discharge will in most cases override the PEB.

This is followed by an initial counseling that is given by the Disability Evaluation System Counselor. At this time the patient is given an overview of the PEB system and then reviews the transcription of their medical board. The member is afforded as much time as is needed to understand the process and questions that they may have are answered.

Once the patient has reviewed the board and the initial counseling is completed, the board is sent for the convening authority signature. The board is then mailed, along with a copy of the member's medical record, to the PEB. Findings (determination of fitness results, Veteran's Administration coding and disability percentages) are received normally within four to six weeks of the mailing.

When findings are received, the member is notified within 72 hours and will be scheduled for final counseling. At this counseling, the member is informed of their options. The options that are given the member is determined by the type of findings, fit for duty or unfit.

For questions or more information regarding medical boards, contact HMC Katrenia Murphy at 830-2425.

From the wire...

Navy Becoming 'Driving' Force in Hearing Tests

NAVHOSP Pensacola, FL -- In a proactive effort to prevent noise-induced hearing loss to Sailors in its area, Branch Medical Clinic Pascagoula, MS, has unveiled the Mobile Hearing Conservation and Audiometric Testing system, known as MOHCAT.

MOHCAT is a specially designed RV-style truck that will provide door-to-door hearing test services for personnel at shore commands and ships along the Gulf Coast.

"The MOHCAT will enhance the Branch Medical Clinic's capabilities four-fold in performing required hearing tests for fleet Sailors," said audiometry team leader, HMCS Michael Chance. "With MOHCAT on board, the clinic can perform 24 tests per hour or about a complete frigate's complement of 192 over an eight-hour period."

"Anyone who works around high noise levels, such as enginemen, or Sailors who rely on their hearing abilities to complete their work, such as sonar technicians, must have their hearing tested annually," said HM1 Kevin Zoll. "The

Continued on next page.

Spring time, sunshine and skin cancer

By Charlotte Meinecke, R.N., Nurse Educator Naval Hospital Twentynine Palms

pringtime and warm sunshine have again returned. Most everyone looks forward to being outdoors and enjoying the new season. However, did you know that 600,000 new cases of skin cancer are diagnosed each year. One in every six Americans is expected to develop some form of skin cancer in his/her lifetime. Fortunately, only a few are fatal, and with early detection.... 90% of skin cancer can be cured.

Skin cancer is an uncontrolled growth of abnormal cells. When it occurs, the skin appears to change in texture or color and a sore or nodule may develop on your skin. These skin changes can usually be seen with the naked eye. Again, ninety percent can be cured if treated early.

The most common cause of skin cancer is excessive exposure to ultraviolet light (sun and tanning beds). Living here in the Mojave Desert, exposure to intense ultraviolet light is routine. Genetic factors also play a part in the tendency to develop skin cancer. Some chemicals and diseases may also increase a persons risk of developing skin cancer. You need to be especially careful if any of the following pertain to you:

- · Have a family history of skin cancer.
- · Have a history of severe sunburns.
- · Are fair-skinned.
- · Freckle easily.
- Have light colored eyes or hair.
- Spend long periods in the sun (seeking the "perfect suntan" or occupations requiring outdoor work).
- · Frequently visit tanning salons.
- · Sunburn easily.
- Take certain antibiotics, antihistamines, or other medications.

Are you at risk for developing skin cancer? YES. Everyone is at risk for developing skin cancer. Many skin cancers occur on the face, neck, and ears, but may also appear elsewhere on the body. Symptoms of skin cancer may include:

- · Sores in the skin that do not heal.
- · A crater like sore (ulcer) on the skin.
- Any sore that oozes fluid, blisters, or has a crusty texture.
- · A change in color on part of skin.

- · Bleeding, itching, or pain.
- Scar-like patch of skin that looks yellowish white and/or waxy.
- A mole that shows changes in size, color, texture, shape, or sensation.
- If you have had skin cancer, you are at a higher risk to have it reoccur.

It is important to be aware of your skin's condition and to know how to examine your skin.

To do so, examine the front and back of your body in a mirror. Lift your arms and check your left and right sides; bend your elbows and examine your forearms and upper underarms. Then check your palms; examine the back of your legs/feet, be sure to check between your toes and the soles of your feet; use a hand mirror to help you examine the back of your neck and scalp; part your hair to get a better look. Balding spots and receding hairlines should also be carefully inspected.

How can you prevent skin cancer? Wear clothing and hats that cover you. Avoid midday sun whenever possible. Use sunscreen lotions to protect against ultraviolet light when you must be outdoors. The higher the SPF (sun protection factor), the greater the protection. The American Cancer Society recommends a SPF value of 15 or more. Remember to cover sensitive areas: ears, lips, bald heads, back of neck, throat, and tops of feet and hands. Use sunscreen regularly, even if you don't plan to spend much

time outdoors, remember, sunscreen works best if applied 30 minutes before going outside (the screening agent needs time to react with your skin before it begins to become effective). Reapply when you are in the sun for long periods of time or if it washes off.

Children need your help to develop good sun awareness habits. It is reported that one severe sunburn, even during childhood, can significantly increase your risk of developing skin cancer. To keep you kids safe in the sun:

- Keep infants and toddlers out of direct sunlight whenever possible.
- Ask you health-care provider about sunscreens for children under 2 years old.
- After age 2, use a sunscreen of at least SPF 15, preferably higher, on your children outdoors.
- Reapply sunscreen often and after swimming.
- Have your children wear sunglasses and wide-brimmed hats outdoors.
- · Provide a shady place for outdoor play.
- Protect your own skin, children learn by example.

Because we live and work in the Mojave Desert, it is even more important for you to understand how to prevent damage to our skin. Questions? For more information on this and other topics, please call Charlotte Meinecke, R.N., Nurse Educator, 830-2218.

From the wire...

Continued from previous page.

MOHCAT provides an effective and efficient way for commands to meet this requirement, with virtually no travel time and little waiting involved."

"A sailor can walk directly off the ship and into the MOHCAT," said HM3 Charles Mays. "It's a significant savings of time away from the job -- as much as two hours."

Branch Medical Clinic Gulfport has been designated as a Mobilization Processing Site for the Second Brigade Seabees during a call-up. "The MOHCAT will be used in support of this... medical processing of hundreds of personnel over two days," said HM1 John Darney.

In the MOHCAT's dedication ceremony, CAPT Ralph A. Lockhart, MSC, commanding officer of Naval Hospital Pensacola, parent command of both clinics, praised BMC Pascagoula for becoming a "driving force in bringing medical services to sailors at the deckplate."

